SUBCONTRACTOR VERIFICATION FORM

APPLICATION NUMBER	311-27	CONTRACTOR MATTHEW	HENTZERMAN	PHONE	: 386-755-5254
·	THIS FORM MUST BE S	SUBMITTED PRIOR TO THE ISSU	NCE OF A PERMIT	FAX:	386-758-4290

In Columbia County one permit will cover all trades doing work at the permitted site. It is <u>REQUIRED</u> that we have records of the subcontractors who actually did the trade specific work under the permit. Per Florida Statute 440 and Ordinance 89-6, a contractor shall require all subcontractors to provide evidence of workers' compensation or exemption, general liability insurance and a valid Certificate of Competency license in Columbia County.

Any changes, the permitted contractor is responsible for the corrected form being submitted to this office prior to the start of that subcontractor beginning any work. Violations will result in stop work orders and/or fines.

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امما	electrical 765	Print Name DAVID WOOD License # FC 1300 2213	Signature	Phone # 386-623-1132
V	i	Print Name GLENN I JONES License #: CAC 0 5 1 4 8 G	Signature_	Phone #: 386-752-5389
1	PLUMBING/ GAS 154	Print Name KENNY KEEN/ROSER WHIDDON License #: CFC 1428686	Signature_	Kemeth Keen Phone #: 386-867-6755
~	ROOFING	Print Name MATTHEW HENTZFLMAN License #: CCC1328208	Signature	Phone #: 386-755-5254
	SHEET METAL	Print NameLicense #:	Signature	Phone #:
	FIRE SYSTEM/ SPRINKLER	Print Name License#:	Signature_	Phone #.
	SOLAR	Print Name License #:	Signature	Phone #:

Specialty License	License Number	Sub-Contractors Printed Name	Sub-Contractors Signature
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F. S. 440.103 Building permits: identification of minimum premium policy.—Every employer shall, as a condition to applying for and receiving a building permit, show proof and certify to the permit issuer that it has secured compensation for its employees under this chapter as provided in ss. 440.10 and 440.38, and shall be presented each time the employer applies for a building permit.